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ABSTRACT

Many problems confront researchers who are developing appropriate methods to determine the effects of sexual abuse. Particularly serious problems arise when the victims are children who were abused while attending a day care center. Several methods for studying child sexual abuse have been recommended. This paper discusses problems researchers encountered in the course of developing an appropriate design for the investigation of a case involving the out-of-home sexual abuse of numerous children. Researchers experienced difficulties in identifying the research sample. These problems stemmed from the methods used for reporting the suspected abuse and the difficulty of locating possible victims due to parental denial of the occurrence of abuse or lack of parental awareness of the alleged incidents. Other problems resulted from the unavailability of data on children's pre-abuse baseline behaviors; information based on parents' retrospective memory had to be used instead. Selection of an adequate comparison group was also difficult. Inclusion of unidentified victims in this group and the self-selection factors of a mailed questionnaire constrained data interpretation. These issues, their implications, and how they were dealt with are discussed. (RH)

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DESIGN ISSUES IN CHILD SEXUAL ABUSE RESEARCH

BY

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Design Issues in Child Sexual Abuse Research

Paulette M. Valliere, Ph.D.

Many problems confront researchers when developing the most appropriate methods to determine the effects of sexual abuse. Further problems arise when the victims are children who were abused while attending a day care center. Finkelhor (1986) recommends several methods to use when attempting to study child sexual abuse. This paper will discuss the problems our research staff encountered in the course of developing an appropriate design for our needs. I will begin by describing the sample and associated problems, and by outlining the details of the original design plan. I will then discuss problems encountered, how they were dealt with, and outcomes as affected by the changes.

Identification of the Research Sample

The initial difficulty encountered by the research staff was that caused by the sample. Problems arose both in finding the group of children in attendance at the day care center during its existence and in dealing with the biases resulting from the actual sample obtained.

In the case of long term abuse at a day care center, the problem entailed finding the children who had attended the school in the four years that the perpetrator had worked there. In discussing the acquisition of adequate samples, Finkelhor suggests using one agency who can provide a list of victims' names. In this case, it is not so simple.

At the outset of the study, we were provided with a list of 103 names of children who had possibly attended the day care center. It has been assumed by us that the list was compiled in several ways. We believe most of the names were collected by the therapist at the community mental health agency

who completed the initial clinical assessments on many of the victims. When the case became public, families came forward to report suspected abuse of their child(ren). When interviewed by Protective Services or by the State Police, children named other children they had observed being abused. It is also possible that some of these children's names were then added to the list, which is by no means complete. The original therapist has since quit her position and is not available to clear up the mystery about the exact method of identification of victims. There are estimates of 200-300 children in attendance during the perpetrator's tenure there. A complete list of children's names who attended the school was known to have existed, but has since vanished.

By the time we were ready to begin data collection, almost a year and a half had passed since the initial disclosures of abuse. Many families had moved or separated in the interim. Addresses were out-of-date and telephone numbers were disconnected or now unlisted due to harassing phone calls received by some families. Of the original 103 names we were given, we were unable to reach 25.

We are currently attempting more aggressive strategies to locate these missing families. This includes letters sent to last known addresses with instructions for the Post Office to correct addresses, and the use of locator services to find families lost before the study began. Finkelhor (1986) also suggests the use of aggressive outreach by local community mental health agencies. The county mental health center has stepped up its outreach program and its sexual abuse education unit has been highly visible; as a result, several more victims have been identified when parents have requested therapy for them.

Because of the assumed method of the collection of names, we have a sample of children and families who have come forward and acknowledge that the abuse occurred to their children. Our sample lacks the children who attended the day care center but either were not abused, were abused but the abuse was not acknowledged by anyone, or had families who were never aware that the problem existed at the day care center. Others might not be aware of the availability of services for the victims at the community mental health center and may have taken their children to private therapists.

Our sample then is biased in favor of families who were willing to come forward with their children and were willing to get help. It will not be possible to examine differences among the subsamples within the group of all the attendees at the day care center. We very likely have a sample of children who have exhibited more visible signs of the abuse and have fewer of the portion of the abused sample whose behavioral effects of the sexual abuse are more subtle, nonexistent, or latent. We also do not have any children who attended the day care center and were definitely not abused.

Baseline Data Collection

The original research design called for the assessment of each child before treatment was to have begun and then again at multiple points during the course of the study. The purpose of these was to assess the children's behaviors, children and family stress, and family atmosphere. The major problem here was the lack of true baseline behavioral data by which to compare the post-trauma data.

We have tried to provide comparable information in two ways: a comparison sample of school children from the local school districts, and retrospective behavioral data (Achenbach CBC) from parents on their

children(ren)'s functioning at several points in time since the traumatic events of the abuse became known. While providing valuable information, these methods have problems in their own right.

Comparison Sample

Originally, the comparison sample was intended to provide information on how the treatment children differ from other children, and to investigate possible contagion effects in the community because of the day care center incident. It was also intended that the parents of the school sample be asked questions about their knowledge of the incident and if they had any contact with victims.

Three local school districts were approached for permission to obtain their school rosters (K-6). It was felt that the use of these three school districts would provide us with a sample that was demographically matched to the attendees of the day care center, which was located in one of the three districts. One district agreed immediately to allow us the use of their school lists. The two others brought the matter to their respective school boards. One agreed to allow us to do the study in their district, the other refused.

Changes in the original design were requested by the schools, however. We were asked not to make any attempt to contact the families other than by mail, and not to involve the children directly in the study. The behavioral measures were to be done by using parents' questionnaires only. They also insisted that no questions concerning the sexual abuse incident be asked.

As Finkelhor points out, the problem with any comparison group is the likelihood of other sexually abused children being included in the sample. While we have attempted to minimize this by removing all known victims from

our list, we do know that there probably are several sexually abused children in the sample, if the national statistics are remotely accurate. Several victims of the day care center incident who were unidentified are also very likely to be in the sample. Enclosed with the set of mailed questionnaires was a letter explaining the general purpose of the study. We asked that they participate in a comparison group of non-abused children whose behaviors would be compared to a sample of sexually abused children. Included was a local phone number they could call to ask any questions they had about the study.

Several phone calls were received after the initial mailing of the questionnaires from mothers who wanted to know how we knew that their children had been abused. Others called to tell how they had been abused as children, or that a family member had been. While we have tried as much as possible to eliminate these children from our sample, we know that the possibility is good that several exist. Their effects on the results will be to mask differences between the behaviors of the abused versus the non-abused sample.

Retrospective Data

With any type of behavioral assessment of the effects of child sexual abuse, it is desirable to have information available on the behavioral functioning of the children before the abuse occurred. Unless the children were part of a longitudinal sample that collected this information before the abuse occurred, this information will not likely be available to the researchers. Finkelhor (1986) suggests that preexisting behavioral problems might well affect the behavioral outcomes of sexual abuse.

Owing to the uniqueness of our sample, behavioral assessments prior to the abuse were not available. Retrospective data was used as a substitute for actual baseline information. At the initial assessment, each parent was asked

to complete an Achenbach Child Behavior Checklist for three time periods: behavior at the time of the perpetrator's trial, behavior in September, 1985 (six months after the trial), and current behavior.

This information, while the closest thing to baseline information possible, introduces a basic design flaw, the lack of reliability of the parent's memory. A parent's memory of how a child behaved several years ago has very likely changed over time because of memory loss, or perhaps is colored by the effects of their child's traumatization. The stress that each family has endured has very likely taken its toll. We have attempted to get confirmatory information by having the questionnaires filled out independently by each parent, thereby getting a reliability check of sorts.

Longitudinal Design

Some of the reasons for the inadequacy of the available information concerning the effects of child sexual abuse stems from the lack of longitudinal data. Finkelhor (1986) urges the more frequent use of longitudinal designs in the study of the long term effects of sexual abuse. This design enables the researcher to assess long term effects of the abuse, both short-term and delayed. Finkelhor also suggests studies lasting longer than one year. Some effects may be very delayed, appearing 10-15 years later. Other post-abuse events, such as court appearances and therapy can also affect the victims.

There are problems inherent in most longitudinal research designs. Our research project has been plagued with two main problems: time factors and subject attrition. The original research design called for four child assessments at 6 month intervals: Spring 86, Fall 86, Spring 87, and Fall 87. We began the original set of assessments in March of 86. (one year after the

trial). We are still in the process of obtaining the first set of assessments from our list of children. We currently have 37 children assessed out of 103.

At the outset, the data collection was fraught with problems. First, the research team was looked upon with some distrust by the community as the intent of the study. As was mentioned in the previous paper, there was much community disagreement as to the veracity of the charges. Parents needed to trust that our intentions were positive to their needs. We built this trust by forming an advisory group, keeping the parents and various stakeholder groups informed of our project's intent and progress.

Secondly, many parents were involved in civil suits against the Board of Directors of the day care center. They were advised by their attorneys not to participate in the study until the suits were settled. Any information obtained by our assessments was feared as available for court subpoena. This problem was resolved in two ways: The suits were settled out-of-court in September, 1986 and we obtained a federal Confidentiality Certificate. With this, we could assure individual confidentiality to parents and the children. Parents were now also free of lawyers' refusal to allow participation in our study.

Third, the assessments were being done by the two therapists hired by the community mental health center to treat the victims. Their time was very limited and scheduling assessments was very difficult, especially during the school year. The therapists also did the calling, after an initial letter of introduction and explanation was sent. As mentioned earlier, out-of-date addresses and phone numbers made this a sometimes futile effort. We attempted to alleviate the backlog of scheduled assessments in Oct. 86 by bringing in a private therapist to do nothing but assessments for one week. This tactic increased our sample size by 14.

We are planning a final aggressive outreach of the earlier refusals and are attempting to obtain up-to-date addresses and phone numbers of the remaining families. We also expect to begin the second round of assessments in the Fall 87. There have been several more civil suits filed recently. These may or may not interfere with this round of assessments.

While longitudinal designs do provide us with information that is otherwise unavailable in one-shot designs, they are plagued with subject attrition problems. Our subjects have moved out of town, county, and state with no forwarding addresses. Bailey (1987) had much success with his longitudinal sample by sending them birthday cards and routine progress reports. While our topic is such that greeting cards may be inappropriate, we might do well by keeping our subjects informed on our progress and future intentions. In this way, we let them know that we are still out there, interested in them, and are more likely to find out they have moved, within a reasonable time span to get their new address.

Multivariate Analyses

As Finkelhor (1986) states, because of the intricacies of sexual abuse, all studies of the effects of it should be geared toward a multivariate approach to analyses. We should be able to look at the contribution of a variety of variables to the effects of sexual abuse. Our study is taking a multivariate approach to the topic, but again is experiencing problems that are unique to the situation.

With any multivariate design, it is suggested that a minimum number of subjects be included in the study based on the number of variables under investigation. Finkelhor (1986) suggests 10 cases for every variable to be included in the design. Given that the numbers of known victims in our case

is limited, this would prove to be an unattainable number of subjects or an extremely limiting set of variables to investigate.

We are also obtaining information from several other sources, aside from the behavioral assessments. We have gained access to court records, Protective Services files, State Police interviews, and therapists' progress notes. All provide a wealth of information about the experiences of the children after the disclosure of the events at the day care center.

The problem with the dataset is what technically would be called missing data. Information on each child is not necessarily available within each data type. Sixty-nine children were interviewed by Protective Services, but only nine children were involved in any type of court appearances, and only one ever testified in front of a jury. Also, after the perpetrator was convicted, no more State Police interviews were conducted. All children were directly referred to the community mental health agency. Therefore, while statistically this lack of information is treated as missing data, it clearly is not.

We have a rich collection of information, more varied for some children than for others. There is only one possible child for whom we will have a totally complete set of agency records; only one child testified at the trial. The other children will have a variety of combinations of record data available. Therefore, their record information is not missing; it never existed.

We will be able to compute our statistical analyses on subsamples of our entire sample. For example, we will be able to look at all children who were interviewed by both the State Police and by Protective Services. This will give us information of similarity of experiences with these agencies and the

outcomes and effects for these children. We can also examine the behavioral outcomes for the children who only have received therapy, but never interacted with other investigative agencies. Comparisons between these subgroups might also give us insight into behavioral effects due to different agency interactions.

Conclusions

There are several design problems we have encountered during this research project that are unique both to longitudinal designs, and to this research study in particular. First, we have had difficulty in the identification of the research sample. This is a problem that stems from both the nature of the topic being investigated, child sexual abuse, and the type of sample we were studying, an unknown number of day care center enrollees over a four year period. This will continue to be a problem until better methods of reporting and detecting possible sexual abuse are developed, and less stigma is attached to the families of the victims, allowing them to report the abuse.

Secondly, baseline behavioral information was not available on our sample. This is a common problem in any investigation into the effects of child sexual abuse. The sample is usually gathered because of the abuse, not before in anticipation of abuse. Retrospective data is then used as a way of gathering information on behaviors evident in the children before the abuse was detected. Problems arise here in the errors that human memory can provide. The effects of the post-trauma experiences might also color the remembering of behaviors witnessed some time back. This project, because of the large time lag and the inability to pinpoint exact time of abuse, has used both a comparison sample and retrospective behavior reports from both parents

based on behaviors noted after disclosure, at several time periods. In this way we have obtained both information on a comparable non-abused sample, and both parents' perspectives of their child(ren)'s behaviors at 3 time periods.

Third, as with any longitudinal design, we have experienced subject attrition, frequent setbacks, and varying amounts of data that is treated as missing information but really is not. We are attempting to locate as many children as possible and have adjusted our timeline and our original design to accommodate the inability to complete the assessments in a reasonable amount of time.

The varying amount of data will allow us to analyze various pieces of our data set. In this way, we can describe differences due to variety of experiences, if any exist.

Longitudinal research in any area is difficult. Such research in child sexual abuse is particularly difficult as just mentioned. However difficult to acquire, any information gleaned from even the smallest sample will add to the very small body of available knowledge on the effects of out-of-home child sexual abuse. It is important that this line of research be continued. All children will benefit.

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